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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Application or Docket Number 09/879722		
CLAIMS AS FILED – PART I (Column 1) (Column 2)								
FOR	NUMBER FILED	NUMBER EXTRA			SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
BASIC FEE (37 CFR 1.16(a))					RATE	FEE		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*			X \$ ____ =		OR	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*			X \$ ____ =		OR	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ \$ ____ =		OR	
* If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL		OR	
CLAIMS AS AMENDED – PART II 9-1-06								
AMENDMENT A	(Column 1)	(Column 2)	(Column 3)			SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	* 40	Minus	** 40	=	X \$ ____ =		OR
	Independent (37 CFR 1.16(b))	* 8	Minus	*** 8	=	X \$ ____ =		OR
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ ____ =		OR
					TOTAL ADD'L FEE		OR	
AMENDMENT B	(Column 1)	(Column 2)	(Column 3)			SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	*	Minus	**	=	X \$ ____ =		OR
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ ____ =		OR
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ ____ =		OR
					TOTAL ADD'L FEE		OR	
AMENDMENT C	(Column 1)	(Column 2)	(Column 3)			SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	*	Minus	**	=	X \$ ____ =		OR
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ ____ =		OR
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ ____ =		OR
					TOTAL ADD'L FEE		OR	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Document Number

094879722

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	24	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	24 minus 20 =	4
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PAYMENT EXTRA
Total	24	24	0
Independent	4	4	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

10/5/05

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PAYMENT EXTRA
Total	24	24	14
Independent	4	4	4
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

07/10/06

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PAYMENT EXTRA
Total	40	38	2
Independent	8	8	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

If the entry in column 1 is less than the entry in column 2, enter "0" in column 3

If the Highest Number Previously Paid For in THIS SPACE is less than 20, enter "20"

If the Highest Number Previously Paid For in THIS SPACE is less than 3, enter "3"

If the Highest Number Previously Paid For (Total or Independent) is the highest number listed in the appropriate line in column 1,

SMALL ENTITY TYPE ☐

OTHER THAN SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	353.00	BASIC FEE	710.00
X30-		X310-	72
X40-		X40-	80
+135-		+370-	
TOTAL		TOTAL	862

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X30-		X310-	
X40-		X40-	
+135-		+370-	
TOTAL ADDL. FEE		TOTAL ADDL. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X30-		X310-	7200
X40-		X40-	800
+135-		+370-	
TOTAL ADDL. FEE		TOTAL ADDL. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X30-		X310-	100
X40-		X40-	0
+135-		+370-	
TOTAL ADDL. FEE		TOTAL ADDL. FEE	1100

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